



## City of Washington

55 West Maiden Street  
Washington, Pennsylvania 15301  
724-223-4203

**FEE \$50**

### Resident Change Registration Application

(Former City Occupancy Permit)

#### **NEW OWNER / RESIDENT**

Name

\_\_\_\_\_

Address

\_\_\_\_\_

Apt #

\_\_\_\_\_

City, State, Zip

\_\_\_\_\_

Tax Parcel ID

\_\_\_\_\_

Phone Number

\_\_\_\_\_

Email

\_\_\_\_\_

#### **PREVIOUS OWNER / RESIDENT**

Name

\_\_\_\_\_

Phone Number

\_\_\_\_\_

Email

\_\_\_\_\_

**PROPERTY OWNER** ☐ Same as Resident

\_\_\_\_\_

Phone Number

\_\_\_\_\_

Email

\_\_\_\_\_

**MOVE-IN-DATE**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please remit payment and application to Washington**

**City Hall, Attn: City Clerk 55 West Maiden Street, Washington, PA 15301**